



Important Update: Effective Saturday, August 1, 2020
Alliance Group Care Members will be Responsible for All Copays
with the Exception of Copays for COVID-19 Related Screening and/or Testing Services

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At Alameda Alliance for Health (Alliance), we value our dedicated provider partner community and appreciate all of the hard work you do to protect health and wellbeing. We would like to share this important update with you. State guidance continues to direct COVID-19 screening and testing to be provided at no cost to patients. The Alliance waived all copays for care and services from Monday, March 16, 2020 through Friday, July 31, 2020 to further ease the burden on our members and providers.

Effective, Saturday, August 1, 2020, copays for applicable care and services will resume, and return to the standard process. This applies to all services where the purpose of the visit is **NOT related** to screening and/or testing for COVID-19. The table below provides a reminder about the standard copays that apply to Alliance Group Care Members only. Alliance Medi-Cal Members have a \$0 copayment for all covered services.

Service	Description	Copayment
Emergency Health Coverage	24-hour care for emergency health care services (Copay is waived if the member is hospitalized.)	\$35
Hospital Services/ Inpatient	Inpatient – Semi-private room and board, and general care associated with the inpatient stay.	\$100
Outpatient Services	Services and supplies for treatment or surgery in an outpatient hospital setting or ambulatory surgery center.	\$10 or \$35 for emergency health coverage
Physician Office Visit	Office visits	\$10 (No copays for preventative health)
Urgent Care Services	Services received at an urgent care center.	\$10

For screening and/or testing for COVID-19, copays will remain zero for Medi-Cal and Group Care members for all medically necessary screening and testing, including hospital (including emergency department), urgent care visits, and provider office visits where the purpose of the visit is to be screened and/or tested for COVID-19. **Providers are required to bill with modifier “CS” and appropriate diagnosis codes for these claims.** Claims with this modifier will be reviewed to confirm that the service rendered is related to COVID-19 screening and/or testing.

Modifier	Description	Copayment
CS	Cost-sharing for specified COVID-19 testing-related services that result in an order for or administration of a COVID-19 test	\$0

Thank you for your dedication and continued service. Together, we are creating a safer and healthier community for all.

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Questions? Please call the Alliance Provider Services Department
Monday – Friday, 7:30 am – 5 pm
Phone Number: **1.510.747.4510**
www.alamedaalliance.org